Department of Justice Commission on Peace Officer Standards and Training 1601 Alhambra Boulevard Sacramento, CA 95816-7083

CERTIFICATE APPLICATION

POST 2-116 (Rev. 08/1988) Page 1 of 2

1. Type of Certificate(s) Requested								FOR POST USE ONLY							
	I	DENTIF	ICAT	ION	INF	ORM	ATIO	N							
2. Name (Last)	Name (Last) (First) (Middle				3. Date	B. Date of Birth Month Day			Year		4. Social Security Number				
5. Employing Agency	6. Date Emplo Month				red as a Peace Officer with Current Agency Day Year					7. Sex	(8. Race			
9. Current Rank/Classification									ted/Promoted to Current Rank Day Year			11. Peace Officer Statu 830P.0			
		EMP	LOY	MEN	T H	STO	₹Y								
Previously Employed as a Full-Time, Paid Peace Officer by the Following Agency(s)					Peace Officer Status P.C.		14. Rank/ Classification		15. Dates F Month			To Day Year			
	830.														
	830.			P.C.	P.C.										
				830		P.C.									
-		RAININ													
ALL TRAINING AND El and other verifying docu	DUCATION MUST BE Suments, which must be	SUPPORT attached	ED B'	Y COF	PIES catio	of tran	script	ts, de	egrees, o	diploma:	s, certi	ficates RNFD	of c	completion	
16. School Where Basic Training Course was Completed				17. Course Length									Date Ended		
20. College/University				tes Atte	ended		22. Educat				0		2	3. Degree	
				From		То		Semester Units			Quarter Units				
				From		То			Units		Quarter Units				
						То		Semester Units			Quarter Units				
	From			То					Quarter Units						
			ATTE	ESTA	TIO	NS									
I attest that I am a full-time, pa Enforcement Code of Ethics. I herein is true and correct.	•					or inforn	nation a	about 1	the applica	tion, call:		()		
24. Signature of Applicant					_ 2	25. Name	(Type/	Print)		Phone No.					
I recommend that the certificate of the Commission's Regulation of the Commission's Regulation personnel records of this jurisc	ns (Basic Certificate requiremens. The applicant in my opinion	nt only), and is of good m	the appl noral cha	licant ha	as bee	n employ	ed in co	omplia	ince with th	ne minimur	m standa	rds set f	orth in	Section 1002	
26. Signature of Department Head or Authorized Designee				Date			Type/Print Department Head's Name and Title								
		FO	R PO	ST L	JSE	ONL	Y								
Type of Certificate Education Units Training Points			Educa		ucation	cation/Institution			Evaluation/Review/Computer						
			\perp												

INSTRUCTIONS FOR COMPLETING THE CERTIFICATE APPLICATION

The Certificate Application form is to be completed and submitted to POST whenever a certificate is requested.

Instructions for completing the form. Please type or print.

1. TYPE OF CERTIFICATE(S) REQUESTED: Enter the type of certificate(s) requested; a single Certificate Application form may be used to apply for multiple certificates. The following abbreviations may be substituted for full titles:

B - Basic SB - Specialized Basic
I - Intermediate SI - Specialized Intermediate
A - Advanced SA - Specialized Advanced
S - Supervisory SS - Specialized Supervisory
M - Management SM - Specialized Management
E - Executive SE - Specialized Executive

IDENTIFICATION INFORMATION

- 2. NAME: Enter the applicant's last name, first name, and middle name or initial. For prevalently used names (e.g., John Brown, Mary Smith), provide the middle name.
- 3. DATE OF BIRTH: Enter the applicant's date of birth (month, day, year) in numerical form (e.g., 10-31-60).
- SOCIAL SECURITY NUMBER: Enter the applicant's social security number. This information will be used solely as the unique identifier for the applicant in processing appropriate POST records.
- EMPLOYING AGENCY: Enter the full name of the current employing agency.
- 6. DATE EMPLOYED AS A PEACE OFFICER WITH CURRENT AGENCY: Enter the actual date of appointment as a peace officer (month, day, year) in numerical form.
- 7. SEX: Enter M (male) or F (female).
- 8. RACE: Enter the applicant's race or ethnic background; abbreviations may be used. This information will be used by POST for statistical purposes only. The following abbreviations may be used:

- 9. CURRENT RANK/CLASSIFICATION: Enter the applicant's rank/classification (e.g., police officer, deputy sheriff, sergeant, lieutenant, captain, sheriff, chief of police, etc.).
- 10. DATE PROMOTED TO CURRENT RANK: Enter the date the applicant was appointed/promoted to current rank (month, day, year) in numerical form.
- 11. PEACE OFFICER STATUS: Complete the Penal Code Section under which the applicant was appointed as a peace officer (e.g., 830.1, 830.2, 830.4, etc.).

EMPLOYMENT HISTORY

- 12. PREVIOUSLY EMPLOYED AS A FULL-TIME, PAID PEACE OFFICER BY THE FOLLOWING AGENCY(S): Enter the full name(s) of the applicant's previous employer(s) (e.g., Blue PD, Green SD, Green Co. DA, etc.).
- 13. PEACE OFFICER STATUS: Complete the Penal Code Section under which the applicant served as a peace officer with the previous employer(s) (e.g., 830.1, 830.2, 830.4, etc.).
- 14. RANK/CLASSIFICATION: Enter the applicant's rank/classification while employed by previous employer(s) (e.g., police officer, deputy sheriff, sergeant, lieutenant, captain, sheriff, chief of police, etc.).
- 15. DATE EMPLOYED: Enter the date the applicant was employed and date terminated/resigned etc. (month, day, year), in numerical form, by previous employer(s).

TRAINING/EDUCATION HISTORY

- 16. SCHOOL WHERE BASIC TRAINING COURSE WAS COMPLETED: Enter the full name of the training facility where the applicant completed basic training. NOTE: Enter "BCW" if the basic training requirement was met through completion of the Basic Course Waiver process.
- 17. COURSE LENGTH HOURS: Enter the total number of hours of basic training the applicant completed.
- 18. DATE STARTED: Enter the date the applicant started basic training (month, day, year) in numerical form.
- 19. DATE ENDED: Enter the date the applicant completed basic training (month, day, year), in numerical form, or, when appropriate, the date of completion of the Basic Course Waiver process.
- 20. COLLEGE/UNIVERSITY: Enter the full name(s) of the college(s) or university(s) the applicant attended.
- 21. DATES ATTENDED: Enter the beginning and ending dates (month and year), in numerical form, the applicant attended the applicable college/university.
- 22. EDUCATION UNITS: Enter the total number of semester or quarter units the applicant earned at the applicable college or university.
- 23. DEGREE: Enter the type of degree awarded to the applicant by the applicable college or university.

ATTESTATIONS

- 24. SIGNATURE OF APPLICANT AND DATE: The applicant must sign and date the attestation on the Certificate Application form.
- 25. TYPE/PRINT NAME OF CONTACT PERSON AND PHONE NO.: TYPE/PRINT the name, area code and telephone number of the person POST should contact regarding information submitted on or with this form.
- 26. SIGNATURE OF DEPARTMENT HEAD AND DATE, TYPE/PRINT DEPARTMENT HEAD'S NAME AND TITLE: The department head or designee must sign and date the form, and clearly type/print his/her name and title. If the department head authorizes someone to sign the application, a POST Certificate Authorization form, POST 2-270 (May '82) must be on file with POST.